

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00524454 </div>	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY				
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP			Date MM / DD / YYYYYY 09 / 13 / 2012	
Mailing Address 325 SPRINGSIDE DR			Amount 147.30	
City AKRON	State OH	Zip Code 44321	Transaction ID : SE.5833	
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: AL <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 147.30				
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP			Date MM / DD / YYYYYY 09 / 13 / 2012	
Mailing Address 325 SPRINGSIDE DR			Amount 21.41	
City AKRON	State OH	Zip Code 44321	Transaction ID : SE.5834	
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: AK <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 21.41				
(a) SUBTOTAL of Itemized Independent Expenditures.....			168.71	
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures.....				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature SCOTT B MACKENZIE		Date MM / DD / YYYYYY 09 / 14 / 2012		
		[Electronically Filed]		